

R E M H D C O

Racial & Ethnic Mental Health Disparities Coalition

REMHDCO's Position (Stakeholder Input) Regarding the Restructure of The State Department of Mental Health

- **Whether it remains with a reorganized Department of Mental Health or is transferred to the Department of Health Care Services, the Office of Multicultural Services (OMS) must be kept intact including retaining the Chief's position that reports directly to a department or agency director.** This must be done so that reducing disparities and cultural competence are given the high priority that is required to achieve the progress in mental health services in California. The Chief's position should be filled as soon as possible.
- **Keeping OMS intact also includes retaining, at minimum, the same positions with the same staff occupying those positions.** If these positions and personnel were to be lost, it would be a tremendous loss to the California Reducing Disparities Project (CRDP). These positions are funded by the MHSA and were specifically protected by the Legislature for this purpose.
- **In addition, the Office of Multicultural Services must retain oversight of:**
 - **The California Reducing Disparities Project (CRDP).** This project has already garnered national attention as the most comprehensive compilation of community-defined practices and approaches that will serve underserved racial, ethnic, and cultural (LGBT) communities in the country. This final plan is not due to be complete until late 2012. This is the final statewide project funded by MHSA Prevention and Early Intervention monies.
 - **The Cultural Competence Plan Requirements (CCPR) Reports.** The CCPR Reports are required from each of the counties and is the only comprehensive report on cultural competence for mental health services at the state level. This vital and informative report has been the most effective way to measure cultural competence in mental health ever developed. In some cases, there is no other review of this data related to cultural competence (that is already required to be performed by counties by existing statutes or regulations.)
- **In regards to the Mental Health Services Act, some form of meaningful oversight must be specified or completed to ensure that counties utilize the funds in accordance with this Act.** This year, the Legislature removed the responsibility for county MHSA plan reviews from the Department of Mental Health and the Mental Health Services Oversight and Accountability Commission. However, the State

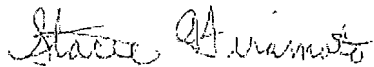
Department of Mental Health should still be involved whether as the lead or in partnership with other stakeholders to:

- **Develop Standards for what constitutes an acceptable Community Stakeholder Process.** This is at the heart of transformation of the mental health system and legitimized how the counties administer the MHSA funds. It is a key component of how oversight at both the state and local levels can be accomplished.
- **Complete the Issue Resolution Process.** There is much confusion regarding this current incomplete process that rests with the Department of Mental Health. This process must be clarified, completed, and publicized so that state and community stakeholders have a way to bring forth concerns and have them addressed in a timely manner.

The Community Stakeholder Process and the Issue Resolution Process were part of the agreements included in the "AB 100 Workgroup" and must not fall by the wayside regardless of the reorganization of the Department of Mental Health.

Thank you for the opportunity to present our concerns. We appreciate your efforts to obtain community stakeholder input and hope that the input is considered and utilized whenever possible.

Sincerely,

A handwritten signature in cursive script that reads "Stacie Hiramoto".

Stacie Hiramoto, MSW
Director